FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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SEC USE ONLY							
Prefix		Serial					
DAT	E RECEIVE	 ED					

Name of Offering (check if this is a	n amendment and name h	nas changed, and inc	licate change.)			
Purchase and Sale of Convertil	ole Promissory Not	es	_				
Filing Under (Check box(es) that apply): Type of Filing: New Filing	☐ Rule 504 ☐ Amendment	☐ Rule 505	⊠ Rule 50	06 Gistion 4(6) ULOE			
	A. BASIC I	DENTIFICATIO	N DATA	SEP			
1. Enter the information requested about	the issuer			\$ 2007			
Name of Issuer (☐ check if this is an	amendment and name ha	s changed, and indi	cate change.)				
Xpree, Inc.				186 (5)			
Address of Executive Offices	(Number an	d Street, City, State	Zip Code)	Telephone Number (Including Area Code)			
1039 Embarcadero Road, Palo	Alto, CA 94303			650-868-9370			
Address of Principal Business Operations	s (Number an	d Street, City, State.	Zip Code)	Telephone Number (Including Area Code)			
(if different from Executive Offices)				PROCECCE			
Brief Description of Business				- TOOLSOED			
Software development				SEP 1 ft 2007			
Type of Business Organization		<u> </u>					
□ Corporation □ limited p	partnership, already forme	ed 🛮 other (p	lease specify): limited liability companiOMSON			
□ business trust □ limited p	partnership, to be formed						
Actual or Estimated Date of Incorporation or Organization: Month							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

 Each promoter of the issuer, if the issuer Each beneficial owner having the pow the issuer: Each executive officer and director of Each general and managing partner of 	ner has been organized within yer to vote or dispose, or dire corporate issuers and of con	ect the vote or disposition o		
Check Box(es) that Apply: E Promoter	■ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Fogarty, Mat				
Business or Residence Address (Number and	Street, City, State. Zip Code)		
c/o Xpree, Inc., 1841 Page Mill Roa	d, Palo Alto, CA 94304	,		
Check Box(es) that Apply: Promoter	■ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Kasenally, Alam				<u> </u>
Business or Residence Address (Number and	Street, City, State, Zip Code)		
c/o Xpree, Inc., 1039 Embarcadero	Road, Palo Alto, CA 9	4303		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			ï	
Business or Residence Address (Number and	Street, City. State, Zip Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		- ""		•
Business or Residence Address (Number and	Street, City, State, Zip Code)	-	
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			_	
Business or Residence Address (Number and	Street, City, State. Zip Code)		

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING					
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix. Column 2, if filing under ULOE.					
2. What is the minimum investment that will be accepted from any individual?	\$		N/A		
2. Describe official constitution constitution of a simple control		Yes	No		
3. Does the offering permit joint ownership of a single unit?		X			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, a commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offerir If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such broker or dealer, you may set forth the information for that broker or dealer only.	ng. ate				
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)	•••••		II States		
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OK]] [OR][ID] MO] PA]		
[RI][SC][SD][TN][TX][UT][VT][VA][WA][WV][WI] Full Name (Last name first, if individual)] [WY	<u> </u>	PR J		
Tan Name (Sust name 115), it instruction,					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			1 States		
[AL][AK][AZ][AR][CA][CO][CT][DE][DC][FL][GA]					
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] MA] [MI] [MN] [MT] [NE] [NV [NH [NJ] [NM [NY] [NC] ND [OH] [OK]					
• • • • • • • • • • • • • • • • • • • •] [OR] [WY		•		
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)		□ Al	1 States		
[AL][AK][AZ][AR][CA][CO][CT][DE][DC][FL][GA]][ID]		
[IL][IN][IA][KS][KY][LA][ME][MD][MA][MI][MN] [MT][NE][NV][NH][NJ][NM][NY][NC][ND][OH][OK]][MO] PA [
] [WY) [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE O	F PROCEED	S	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate fering Price		t Already old
		\$	500,000.00	\$	0.u C
	Debt*	\$	0	\$	(
	Convertible Securities (including Warrants)	\$	0	\$	(
	Partnership Interests	\$	0	\$	(
	Other (Specify)	\$	0	\$	(
	Total	\$	500,000.00	\$	O
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Num	ber Investors	Dollar	regate Amount rchases
	Non-accredited Investors.		0	\$	(
	Total (for filings under Rule 504 only)		0	\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Amount old
	Rule 505			\$	(
	Regulation A			\$	(
	Rule 504			\$	(
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	The Control of the Control		×	\$	(

Transfer Agent's Fees	×	\$_	0
Printing and Engraving Costs	×	\$_	0
	×	\$	0
Legal Fees	_ X	\$	0
Accounting Fees	_	Ψ_	
Engineering Fees	×	? _	
Sales Commissions (specify finders' fees separately)	×	\$_	0
Other Expenses (identify) Blue Sky Filing Fees	×	\$ _	300.00
Total	×	\$ _	300.00

^{*}This filing covers the Convertible Notes, the Preferred Stock upon conversion of such Convertible Notes and the Common Stock issuable upon conversion of such Preferred Stock.

М	at Fogarty (Chief Executive Officer							
	5 \ 71 /	Title of Signer (Print or Type)							
X	pree, Inc.	Mitagarty				- 1 -		12	9 , 2007
sig info	e issuer has duly caused this notice to be signed by the und nature constitutes an undertaking by the issuer to furnish to ormation furnished by the issuer to any non-accredited inve- uer (Print or Type)	o the U.S. Securities and Exchange	Com	mission,	s filed ur upon w	ritte	Ru n re	que	95, the following st of its staff, the
		FEDERAL SIGNATURE							
	Total Payments Listed (column totals added)				⊠ \$—				<u>,</u>
	Column Totals		×	\$		Ť	×	-	,700.00
			×	\$		0	×	Ψ	<u>0</u> 499,700.00
	Other (specify):		Ø	\$			×	\$ —	<u>_</u>
	Working capital		X	\$			×	\$ -	0
	Repayment of indebtedness		×	\$			×	\$— •	499,700.00
	offering that may be used in exchange for the assets of pursuant to a merger)	or securities of another issuer	×	\$		0	×	•	0
	Acquisition of other businesses (including the value of		-	Ψ			لبت	Ψ_	
	Construction or leasing of plant buildings and faciliti		×	\$		0	E E	-	0
	Purchase, rental or leasing and installation of machin		×	\$		0	×	•	0
	Salaries and fees		×	•		0	×	•	0
	Out of the road Com-			Öi Dire Af	ments to fficers, ectors, & filiates		×		Payments To Others
5.	Indicate below the amount of the adjusted gross proceeds for each of the purposes shown. If the amount for any properties and check the box to the left of the estimate. The total adjusted gross proceeds to the issuer set forth in response	urpose is not known, furnish an estill of the payments listed must equal	mate						
	b. Enter the difference between the aggregate offerir Question I and total expenses furnished in response to P the "adjusted gross proceeds to the issuer."	art C - Question 4.a. This differenc	e is					\$_	499,700.00

D. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

ATTENTION .

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)